DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: PARKSIDE HEIGHTS (110193)

Address: 6805 CENTURY AVE, MIDDLETON, WI 53562

License Status: REGULAR

Licensed/Certified/Registered 08/31/1997

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0094573 End Date: 04/04/2005 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008201 Served 04/19/2005

Deficiencies Cited Subject Area

83.43(3)(b)2 TESTING OF SMOKE DETECTORS

Compliance

Verified Corrected

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